GCIL Payroll - PA Leaving Form

Employers Details

Employer's signature:	Date:
Reason for deductions:	
Any deductions due:	
Number of holiday hours outstanding:	
Final Salary hours due:	
Leaving Date:	
Leaving Details	
National Insurance Number:	
Telephone Number:	
Address	
Name:	
Personal Assistant's Details	
Email address.	
Email address:	
Telephone Number:	
Address:	
Name:	

For official use only

SSP IT		Student Loan		
Sick Line		P45		
Breakdown of final payment:				
Letter from payroll confirming leaving date attached				
Actioned by:				
Date				

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